Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 1 of 69

Fill in this information to identify your c			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	<u> </u>	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Kayel First Name	First Name
	identification (for example, your driver's license or	Michelle Middle Name	 Middle Name
	passport).	Ellis	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or maiden names.	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
	your Social Security	xxx - xx - 6 8 2 5	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 2 of 69

Del	_	(ayel irst Name	Michelle Middle Name	Ellis Last Name	Case number (if known)			
			About Debt	or 1:	About Debtor	2 (Spouse Only in a Joint Case):		
4.	and Emp		✓ I have	not used any business names or EIN	ls. I have not	t used any business names or EINs.		
		ition Numbers I have used in I years	Business nam	е	Business name			
	Include tr	ade names and siness as names	Business nam	е	Business name			
	doing but	mess as names	Business nam	е	Business name			
			EIN		EIN			
			EIN		<u> </u>			
5.	Where yo	ou live			If Debtor 2 live	es at a different address:		
			3615 Tam	arind	<u> </u>			
			Number St	reet	Number Stree	t		
			Hazel Cres	st IL 60429				
			City	State ZIP Code	City	State ZIP Code		
			Cook		-			
			County		County			
			the one abo	ing address is different from ove, fill it in here. Note that the nd any notices to you at this ress.	from yours, fil	nailing address is different II it in here. Note that the court otices to you at this mailing		
			Number St	reet	Number Stree	t		
			P.O. Box		P.O. Box			
			City	State ZIP Code	City	State ZIP Code		
6.		are choosing	Check one:		Check one:			
	bankrupt	ict to file for cy	petition	ne last 180 days before filing this n, I have lived in this district longer any other district.	petition, I	ast 180 days before filing this have lived in this district longer by other district.		
				another reason. Explain. 8 U.S.C. § 1408.)		other reason. Explain. J.S.C. § 1408.)		
Р	art 2:	Tell the Court	About Your Ba	ankruptcy Case				
7.	Bankrup	oter of the tcy Code you		For a brief description of each, see N y (Form 2010)). Also, go to the top o		1 U.S.C. § 342(b) for Individuals Filing the appropriate box.		
	are choo under	sing to file	✓ Chapter	7				
			Chapter	11				
			☐ Chapter	12				
			☐ Chapter	13				

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 3 of 69

Deb	tor 1 Kayel	Michelle	Ellis	Case number (if known)				
	First Name	Middle Name	Last Name					
8.	How you will pay the fee	court pay v beha	for more details about how you vith cash, cashier's check, or m f, your attorney may pay with a	my petition. Please check with the may pay. Typically, if you are particularly, if your arterney is substantial card or check with a pre-pri	ying the fee yourself, you may mitting your payment on your nted address.			
			• •	nts. If you choose this option, sign in Installments (Official Form 103A)	• •			
		By la than fee ir	I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	Have you filed for	☑ No						
	bankruptcy within the last 8 years?	Yes.						
		District _		When MM / DD / YYYY	Case number			
		District _		When MM/DD/YYYY	Case number			
		District _		When MM / DD / YYYY	Case number			
10.	Are any bankruptcy cases pending or being	☑ No						
	filed by a spouse who is	☐ Yes.						
	not filing this case with you, or by a business	Debtor _		Relationsl	hip to you			
	partner, or by an affiliate?	District _		When MM / DD / YYYY	Case number,			
				IMIMI / DD / TTTT	II KIIOWII			
		Debtor _		Relations	hip to you			
		District _		When	Case number,			
11.	Do you rent your residence?	✓ No. ☐ Yes.	residence? No. Go to line 12.	n eviction judgment against you ar				
			Yes. Fill out Initial State	ement About an Eviction Judgment	Against You (Form 101A)			

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 4 of 69

Deb	tor 1	Kayel First Name	Miche Middle N		Ellis Last Name	Case number (i	f known)		
P	art 3:	•			sses You Own as	a Sole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a					Go to Part 4. Name and location of b Name of business, if any	usiness			
	separat	e legal entity such as ration, partnership, or			Number Street				
	sole pro	ave more than one oprietorship, use a e sheet and attach it retition.			Health Care Busi Single Asset Rea Stockbroker (as of	box to describe your business: ness (as defined in 11 U.S.C. § Il Estate (as defined in 11 U.S.C defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 10	101(27A)) c. § 101(51B))	ZIP Code	
Chapte Bankru are you	u filing under r 11 of the ptcy Code and a small business	<i>can</i> mos	<i>set ap</i> st rece	propriate deadlines. If and balance sheet, staten	the court must know whether you indicate that you are a small nent of operations, cash-flow state texist, follow the procedure in	ll business deb atement, and fe	otor, you must attach your ederal income tax return		
	debtor?		☑	No.	I am not filing under C	hapter 11. ter 11, but I am NOT a small bu	siness debtor	according to the definition in	
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).				the Bankruptcy Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
P	art 4:	Report If You (Own o	r Hav	e Any Hazardous I	Property or Any Property	/ That Need	ds Immediate Attention	
14.	propert alleged immine	o you own or have any coperty that poses or is leged to pose a threat of minent and identifiable azard to public health or		No Yes.	What is the hazard?				
	safety?	Or do you own operty that needs attention?			If immediate attention	is needed, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State 7IP Code	

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 5 of 69

Debtor 1 Kayel Michelle Ellis Case number (if known) Last Name

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

10	u musi check one.
	I received a briefing from an approved credit
	counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

About Debtor 1:

Vou must sheek one

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days offer you file this bankruptcy petitio

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

for cause and is l	limited to a maximum of 15 days.
☐ I am not require credit counselin	d to receive a briefing about g because of:
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Active duty. I am currently on active military

reasonably tried to do so.

duty in a military combat zone.

You must check one:
☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

About Debtor 2 (Spouse Only in a Joint Case):

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counselin	g because of:
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Lam not required to receive a briefing about

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 6 of 69

Deb	otor 1	Kayel	Miche		EII	is		Case number (if	know	n)
		First Name	Middle N	ame	Las	t Name				
P	art 6:	Answer These	Quest	ons	for Repo	rting Pu	rpos	ses		
16. What kind of debts do you have?			16a.							
			16b.			isiness or ir o line 16c.		iness debts? Business debt ment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	Stat	te the type	of debts you	u owe	e that are not consumer or bu	siness	s debts.
17.	Are you	u filing under r 7?		No.	I am not f	iling under (Chap	ter 7. Go to line 18.		
	any exe	estimate that after empt property is		Yes.	-			•	-	xempt property is excluded and to distribute to unsecured creditors?
		excluded and administrative expenses			☑ No					
	availab	d that funds will be le for distribution ecured creditors?			☐ Yes					
18.		any creditors do		1-49				1,000-5,000		25,001-50,000
	you est owe?	timate that you		50-99 100-1 200-9	99			5,001-10,000 10,001-25,000		50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$50,0 \$100,	50,000 001-\$100,00 ,001-\$500,0 ,001-\$1 mil	000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$50,0 \$100,	50,000 001-\$100,00 ,001-\$500,0	000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 7 of 69

Debtor 1	Kayel	Michelle	Ellis	Case number (if known)			
	First Name	Middle Name	Last Name				
Part 7:	Sign Below						
For you		I have exami and correct.	ned this petition, and I de	clare under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		•	•	not pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		connection w	•	, concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.			
			I Michelle Ellis chelle Ellis, Debtor 1	X Signature of Debtor 2			
		Executed	on 07/25/2016	Executed on			

MM / DD / YYYY

MM / DD / YYYY

Entered 07/26/16 16:31:10 Desc Main Page 8 of 69 Case 16-23961 Doc 1 Filed 07/26/16 Document

Debtor 1	Kayel	Michelle	Ellis	Case number	(if knowr	1)	
	First Name	Middle Name	Last Name			,	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		eligibility to p relief availab the debtor(s)	proceed under Chapter le under each chapter the notice required by	need in this petition, declare tha 7, 11, 12, or 13 of title 11, Un for which the person is eligible 11 U.S.C. § 342(b) and, in a er an inquiry that the informati	ited Stat e. I also case in v	tes Code, and have explained to certify that I have delivered to which § 707(b)(4)(D) applies,	0
			ert J. Adams & Asso of Attorney for Debtor		Date	07/25/2016 MM / DD / YYYY	
		Robert .	J. Adams & Associa	ates			
		Printed na					
		Robert S Firm Nam	J. Adams & Associa	ates			
			Jackson, Suite 202				
		Number	Street				
		Chicago)	IL		60607	
		City		State	е	ZIP Code	
		Contact p	ohone (312) 346-010	00 Email address			
		0013056	S				
		Bar numb	per	State	<u></u> е	_	

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 9 of 69

F	ill in this inform	nation to identify y	our case:					
	Debtor 1	Kayel	Michelle	,	Ellis			
		First Name	Middle Na	ame	Last Name	e		
	Debtor 2	First Name	Middle Na		Last Nar			
	(Spouse, if filing)	kruptcy Court for the:						
	Case number	kruptcy Court for the.				<u> </u>	_	Objects if their in our
	(if known)						Ц	Check if this is an amended filing
	fficial Form 10		D. 4. F					
A	pplication for	Individuals to	Pay the F	iling Fee	in insta	iments		12/15
	as complete and pplying correct ir	accurate as possib formation.	le. If two ma	arried peopl	e are filing t	ogether, both are ed	qually respo	nsible for
F	Part 1: Specif	y Your Proposed F	Payment Ti	metable				
1.	Which chapter of you choosing to	of the Bankruptcy C o file under?	ode are	☑ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	ter 11 ter 12			
2.	You may apply to pay the filing fee in u four installments. Fill in the amounts y propose to pay and the dates you plan pay them. Be sure all dates are busine		ts you lan to siness	You propo	ose to pay	☑ With the filing o		
	days. Then add to pay.	I the payments you	propose			On or before this da	ıte	MM / DD / YYYY
	You must propose to pay the entire fee no later than 120 days after you file this		e no			On or before this da		MM / DD / YYYY
	bankruptcy case	 If the court approve court will set your final 						MM / DD / YYYY
	payment timetab			+		On or before this da	ite	MM / DD / YYYY
			Total	\$0	.00	< Your total must o	-	
	Part 2: Sign B	olow				chapter you checke	d in line 1.	
	d that you unders	u state that you are stand that:	unable to pa	y the full fili	ing fee at or	ice, that you want to	pay the fee	in installments,
•		our entire filing fee be						attorney,
•		he entire fee no later debts will not be disc				nkruptcy, unless the	court later ex	tends your
•		ake any payment whe ceedings may be affe		our bankrupt	cy case may	be dismissed, and yo	our rights in o	other
Х	/ /s/ Kayel Miche	lle Ellis	X			X /s/ Ro	bert J. Adar	ns & Associates
	Cayel Michelle Ellis,		Signatur	re of Debtor 2	2	Robert J	. Adams & A	
	Date: 07/25/2016		Date:			Date: 07 /	25/2016	
	MM / DD / YY	YY	_	M / DD / YYY	Y		1 / DD / YYY	

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 10 of 69

Debtor 1	Kayel	Michelle	Ellis	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	r the: NORTHERN DISTRIC	T OF ILLINOIS	
Case number				
(if known)				
Chapter filing und	der:		☑ Chapter 7	
			☐ Chapter 11 ☐ Chapter 12	
			☐ Chapter 12	
			<u> </u>	
rder Approvi	ng Payment	of Filing Fee in Inst	allments	
		Month / day / year		
		Month / day / year		
		Month / day / year		
		Month / day / year		
Total				
		ebtor(s) must not make any a s in connection with this case	dditional payment or transfer a e.	ny additional property to an
		By the court:		
N. / a	nth / day / year		United States Bankruptcy Ju	das

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 11 of 69

Fill in this inf	ormation to	identify your case	and this filing:		
Debtor 1	Kayel	Michelle	Ellis		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number				Chook	if this is an
(if known)				—	if this is an ed filing
Official Form					
Schedule A	B: Propert	ty			12/15
filing together, bo sheet to this form	oth are equally r	esponsible for supplyi any additional pages,	e as complete and accurate as ng correct information. If more write your name and case num ng, Land, or Other Real Es	space is needed, attach a s ber (if known). Answer eve	eparate ry question.
			-		
	or nave any leg a to Part 2.	al or equitable interest	in any residence, building, land	d, or similar property?	
<u> </u>	nere is the prope	rty?			
		_	of your entries from Part 1, inclite that number here	_	\$0.00
Part 2: De	scribe Your \	/ehicles		•	
30					
-		•	any vehicles, whether they are also report it on Schedule G: Exe	_	•
3. Cars, vans, to	rucks, tractors,	sport utility vehicles, r	notorcycles		
□ No ✓ Yes					
3.1.		Who has	an interest in the property?	Do not deduct secured clair	ms or exemptions. Put the
Make:		Check one		amount of any secured clai	
Model:			r 1 only r 2 only	Creditors Who Have Claims Current value of the	Current value of the
Year:			r 1 and Debtor 2 only	entire property?	portion you own?
Approximate milea	ige:	At leas	st one of the debtors and another	\$0.00	\$0.00
Other information: 2014 Chevy Car	maro		c if this is community property		
3.2.			an interest in the property?	Do not deduct secured clair	ms or exemptions. Put the
Make:		Check one		amount of any secured clai	ms on <i>Schedule D:</i>
Model:		💾 5.1.4.	r 1 only r 2 only	Creditors Who Have Claims Current value of the	Current value of the
Year:			r 1 and Debtor 2 only	entire property?	portion you own?
Approximate milea	ige:	At leas	st one of the debtors and another	\$0.00	\$0.00
Other information:	libu	□ Chool	r if this is community property		
2010 Chevy Mal	iibu		if this is community property nstructions)		

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 12 of 69

Debte		Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)	
	Example ☑ No				vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories	
-	☐ Yes	delles velve e		for all of autolo	a form Dant O. in abouting any	
					s from Part 2, including any er here →	\$0.00
Pa	rt 3:	Describe Y	our Personal and	Household Item	s	
Do y	ou own	or have any le	gal or equitable intere	st in any of the follo	wing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example	old goods and s: Major applia	furnishings inces, furniture, linens,	china, kitchenware		
	□ No ✓ Yes.	Describe	used furniture			\$300.00
	Electro n Example	s: Televisions		-	equipment; computers, printers, scanners; es, cameras, media players, games	
	☑ No □ Yes.	Describe				
					c; books, pictures, or other art objects; ns, memorabilia, collectibles	
	✓ No ☐ Yes.	Describe				
					ent; bicycles, pool tables, golf clubs, skis; s	
	☑ No □ Yes.	Describe				
	Firearm: Example		s, shotguns, ammunitic	on, and related equipn	nent	
	☑ No □ Yes.	Describe				
	Clothes Example	s: Everyday cl	othes, furs, leather coa	ts, designer wear, sh	pes, accessories	
	□ No ☑ Yes.	Describe	clothing			\$250.00
	Jewelry Example	s: Everyday je gold, silver	welry, costume jewelry,	engagement rings, v	vedding rings, heirloom jewelry, watches, gems,	
	☑ No □ Yes.	Describe				
	Example	n animals s: Dogs, cats,	birds, horses			
	✓ No	Describe				

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 13 of 69

Deb	otor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)	
14.	-	her personal and			including any health aids you	
	did no					
	_	s. Give specific ormation				
15.					ny entries for pages you have	\$550.00
P	art 4:	Describe Yo	our Financial Ass	ets		
Do	you owr	n or have any lega	al or equitable intere	st in any of the follov	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		petition	ave in your wallet, in y	our home, in a safe de	posit box, and on hand when you file your	
	☐ No				Cash:	\$25.00
17.	•	-	uses, and other simila		s of deposit; shares in credit unions, ave multiple accounts with the same	
	□ No ☑ Ye	S	. Institutio	n name:		
	17	7.1. Other finance	cial account: pre-pai	d debit card		\$200.00
18.			r publicly traded stoon nvestment accounts v		oney market accounts	
	☑ No □ Ye		. Institution or issue	r name:		
19.	-	-	ck and interests in ir artnership, and joint	•	corporated businesses, including	
	info	s. Give specific ormation about	Nome of option		0/ of our orabin	
20.	Govern Negotia	able instruments ir	rate bonds and other aclude personal check	s, cashiers' checks, p	% of ownership: negotiable instruments romissory notes, and money orders. e by signing or delivering them.	
	info	s. Give specific ormation about	. Issuer name:			
21.	Examp	profit-sharing	RA, ERISA, Keogh, 40	1(k), 403(b), thrift savi	ngs accounts, or other pension or	
		s. List each	Type of account:	Institution name:		

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 14 of 69

Deb	tor 1 Kayel	Michelle	Ellis	Case number (if known)		
	First Name	Middle Name	Last Name			
22.		posits you have m		continue service or use from a company (electric, gas, water), telecommunications		
	√ No					
	Yes		Institution name or in	ndividual:		
23.	Annuities (A contract for a	specific periodic	payment of money to	you, either for life or for a number of years)		
	☑ No □ Yes	Issuer name and	description:			
24.	Interests in an education I 26 U.S.C. §§ 530(b)(1), 529		•	program, or under a qualified state tuition	n progran	n.
	✓ No ☐ Yes	Institution name	and description. Sepa	arately file the records of any interests. 11 U	J.S.C. § 52	1(c)
25.	Trusts, equitable or future powers exercisable for yo		perty (other than any	thing listed in line 1), and rights or		
	No No					
	Yes. Give specific information about them					
26.	Patents, copyrights, trade Examples: Internet domain			ectual property; es and licensing agreements		
	☑ No					
	Yes. Give specific information about them					
27.	Licenses, franchises, and Examples: Building permits	_	-	iation holdings, liquor licenses, professional	licenses	
	, No	•	,	3 7 1		
	Yes. Give specific					
	information about them					
Mor	ney or property owed to yo	u?			port Do n	rent value of the ion you own? not deduct secured as or exemptions.
28.	Tax refunds owed to you					
	☑ No					
	Yes. Give specific info			Fe	ederal:	\$0.00
	about them, including w			St	ate:	\$0.00
	and the tax years			Lo	ocal:	\$0.00
20	Family support					
23.	• • • • • • • • • • • • • • • • • • • •	p sum alimony, sp	ousal support, child s	upport, maintenance, divorce settlement, pr	operty settl	ement
	☑ No			•••		40.00
	Yes. Give specific info	rmation		Alimony:		\$0.00
				Maintenance:		\$0.00
				Support:		\$0.00 \$0.00
				Divorce settle		
				Property settle	ement:	\$0.00
30.	Other amounts someone	-	a navmente disability	benefits, sick pay, vacation pay, workers'		
		•		bu made to someone else		
	No					
	Yes. Give specific info	เกลแอก				

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 15 of 69

Debt	or 1 Kayel	Michelle	Ellis	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insur Examples: Health	•	health savings accou	nt (HSA); credit, homeowner's, or renter's ins	surance
	☑ No				
	Yes. Name th	e insurance			
	company of e	· •			
	and list its val	ue Company nai	me:	Beneficiary:	Surrender or refund value:
32.	If you are the bene	roperty that is due you from eficiary of a living trust, expendence property because someone	ct proceeds from a life	died e insurance policy, or are currently	
	✓ No ☐ Yes. Give spe	ecific information			
33.	-	nird parties, whether or not ents, employment disputes, ir	•	suit or made a demand for payment ghts to sue	
	☑ No				
		e each claim			
34.	Other contingent	-	every nature, includ	ling counterclaims of the debtor and	
	⋈ No				
	Yes. Describe	e each claim			
35.	Any financial ass	ets you did not already list			
	✓ No ✓ Yes. Give spe	ecific information			
36.	Add the dollar va	lue of all of your entries fro	om Part 4, including	any entries for pages you have	
					\$225.00
Pa	rt 5: Describe	e Any Business-Relate	ed Property You	Own or Have an Interest In. List a	ny real estate in Part 1
37.	Do you own or ha	ave any legal or equitable i	nterest in any busine	ess-related property?	
	No. Go to Pa	t 6.			
	Yes. Go to lir	e 38.			
	_				
					Current value of the portion you own?
					Do not deduct secured
					claims or exemptions.
38.	Accounts receive	ible or commissions you al	ready earned		
	✓ No ✓ Yes. Describe				
	ш				
39.	Examples: Busine	 furnishings, and supplies ess-related computers, software chairs, electronic devices 		s, copiers, fax machines, rugs, telephones,	
	⋈ No				
	Yes. Describe	e			
40.		es, equipment, supplies yo	u use in business, a	nd tools of your trade	
	✓ No Yes. Describe	e			
41.	Inventory				
	☑ No				
	Yes. Describe	2			

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 16 of 69

Deb	tor 1 Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)	
42.	Interests in partnerships or	joint ventures			
	✓ No Yes. Describe Name	of entity:		% of ownership:	
43.	Customer lists, mailing lists	s, or other compi	lations		
	✓ No Yes. Do your lists inclu No Yes. Describe.		entifiable informa	ntion (as defined in 11 U.S.C. § 101(41A))?	
44.	Any business-related prope	rty you did not a	Iready list		
	✓ No ☐ Yes. Give specific inform	nation.			
45.		-		ng any entries for pages you have	\$0.00
Pa	nrt 6: Describe Any Fa			g-Related Property You Own or Have a in Part 1.	n Interest In.
46.	Do you own or have any leg	jal or equitable ii	nterest in any farr	m- or commercial fishing-related property?	
	✓ No. Go to Part 7. ☐ Yes. Go to line 47.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry	, farm-raised fish			
	✓ No ☐ Yes				
48.	Cropseither growing or ha	rvested			
	✓ No Yes. Give specific information				
49.	Farm and fishing equipmen	t, implements, m	achinery, fixtures	s, and tools of trade	
	✓ No ☐ Yes				
50.	Farm and fishing supplies,	chemicals, and f	eed		
	✓ No ☐ Yes				
51.	Any farm- and commercial f	fishing-related p	roperty you did no	ot already list	
	✓ No ☐ Yes. Give specific information				
52.		-		ng any entries for pages you have	\$0.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 17 of 69

Deb	otor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name	Case no	umber (if known)		
P	art 7:	Describe Al	II Property You Ow	n or Have an	nterest in That You I	Did Not List Above	9	
53.	-	•	operty of any kind you kets, country club memb	•	st?			
	☑ No □ Ye	s. Give specific	c information.					
54.	Add th	e dollar value	of all of your entries fro	m Part 7. Write	hat number here	→		\$0.00
Р	art 8:	List the Tot	als of Each Part of	this Form				
55.	Part 1:	Total real esta	ate, line 2					\$0.00
56.	Part 2:	Total vehicles	, line 5		\$0.00			
57.	Part 3:	Total persona	I and household items,	line 15	\$550.00			
58.	Part 4:	Total financial	l assets, line 36		\$225.00			
59.	Part 5:	Total busines	s-related property, line	45	\$0.00			
60.	Part 6:	Total farm- an	d fishing-related prope	rty, line 52	\$0.00			
61.	Part 7:	Total other pro	operty not listed, line 5	4	+\$0.00			
62.	Total p	personal prope	rty. Add lines 56 throu	gh 61	\$775.00	Copy personal property total	+	\$775.00
63.	Total c	of all property of	on Schedule A/B. Add	d line 55 + line 62				\$775.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 18 of 69

☐ Yes

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 19 of 69

Debtor 1	Kayel	Michelle	Ellis		Case number	(if known)
	First Name	Middle Name	Last Name			
Part 2:	Additional	Page				
	iption of the prop A/B that lists this	property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		ck only one box for h exemption	
Brief descrip	ption:		\$25.00	☑	\$25.00 100% of fair market	735 ILCS 5/12-1001(b)
Line from Se	chedule A/B:	16			value, up to any applicable statutory limit	
Brief descrip	•		\$200.00	1	\$200.00 100% of fair market	735 ILCS 5/12-1001(b)
Line from S	chedule A/B: 1	7.1			value, up to any applicable statutory limit	

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 20 of 69

Michelle Middle Name	Ellis Last Name			
/liddle Name	Last Name			
NORTHERN DIST	TRICT OF ILLINOIS	3		
			Check if this is amended filing	
Have Claim	ns Secured by	Property		12/15
eded, copy the Ad your name and c	lditional Page, fill it is a sase number (if knownty?	out, number the entri	es, and attach it to thi	s form.
ach claim. If more other creditors in F	than one Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
•	•	\$28,270.00	\$0.00	\$28,270.00
Contingent Unliquidated Disputed Nature of lien. An agreeme Statutory lied Judgment lie	Check all that apply. Int you made (such as In (such as tax lien, men from a lawsuit	s mortgage or secured	car loan)	
	Have Claim Have C	Aichelle Ellis Ididdle Name Last Name Ididdle Name L	Michelle Ellis Middle Name Last Name MORTHERN DISTRICT OF ILLINOIS B. If two married people are filing together, both are equall eded, copy the Additional Page, fill it out, number the entries your name and case number (if known). Bed by your property? In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is form to the court with your other schedules. You have nothelelow. In it is for	As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) JORTHERN DISTRICT OF ILLINOIS Check if this is amended filing Che

Add the dollar value of your entries in Column A on this page. Write that number here:

\$28,270.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 21 of 69

Debtor 1	Kayel	Michelle		Case number (if	known)			
	First Name	Middle Nam	ne Last Name					
Part 1:	Additional Pa After listing any sequentially fron	entries on t	this page, number them ous page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
2.2			Describe the property that secures the claim:	\$13,054.23	\$0.00	\$13,054.23		
Santander Consumer USA Creditor's name PO Box 961245 Number Street			2010 Chevy Malibu					
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check in	•	code e.	As of the date you file, the claim is Contingent Unliquidated Disputed Nature of lien. Check all that apply An agreement you made (such a Statutory lien (such as tax lien, n Judgment lien from a lawsuit Other (including a right to offset) Car loan	s mortgage or secured	car loan)			
Date debt w	as incurred		Last 4 digits of account number					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$13,054.23

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$41,324.23

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 22 of 69

Fill in this info	ormation to ident	tify your case:		
Debtor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1.	Do any	creditors	have	priority	unsecured	claims	against y	ou?
----	--------	-----------	------	----------	-----------	--------	-----------	-----

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 23 of 69

Debtor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)	
Part 2:	List All of	Your NONPRIORI	TY Unsecured C	aims	
3. Do ar	nv creditors have	e nonpriority unsecure	ed claims against voi	u?	
	-			the court with you other schedules.	
ш.	res	gpp-		, ,	
_	Il of your nonnri	iority unsocured claim	e in the alphahetical	order of the creditor who holds each claim.	
If a cr type c	reditor has more to of claim it is. Do	han one nonpriority uns not list claims already in	ecured claim, list the cluded in Part 1. If m	creditor separately for each claim. For each claim lister or than one creditor holds a particular claim, list the of I out the Continuation Page of Part 2.	,
					Total claim
4.1					\$1,000.00
AT&T			Last 4 digits of a	ccount number	Ψ1,000.00
Nonpriority C	Creditor's Name		When was the de		
PO Box 8	3212 Street			ou file, the claim is: Check all that apply.	
				,	
			Unliquidated		
Aurora		IL 60572	Disputed		
City		State ZIP Code	Type of NONPRI	ORITY unsecured claim:	
	red the debt?	Check one.	☐ Student loans		
	1 only		Obligations a	rising out of a separation agreement or divorce	
□ ~	· 2 only · 1 and Debtor 2 o	only		ot report as priority claims	
_	st one of the debt	•		sion or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Speci Utility	гу	
_	m subject to offs	-	Othicy		
✓ No	oubjoor to one				
Yes					
4.2					\$200.00
Bank of A	America Creditor's Name		Last 4 digits of a		
PO Box 1			When was the de		
Number	Street			ou file, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Norfolk		VA 23501			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRI	ORITY unsecured claim:	
Debtor		Officer offic.	Student loans		
	· 2 only			rising out of a separation agreement or divorce	
Debtor	1 and Debtor 2		•	ot report as priority claims sion or profit-sharing plans, and other similar debts	
At leas	st one of the debt	ors and another	Other. Speci		
☐ Check	if this claim is f	for a community debt	Other		
Is the clair	m subject to offs	set?			
☑ No					
☐ Yes					

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 24 of 69

Debtor 1 Kayel Michelle Ellis Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$500.00 Comcast Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3002 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Southeastern PA 19398 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Other Is the claim subject to offset? **☑** No Yes П 4.4 \$500.00 Last 4 digits of account number ComEd Nonpriority Creditor's Name When was the debt incurred? **Customer Care Center** Street As of the date you file, the claim is: Check all that apply. P.O.Box 87522 Contingent Unliquidated Disputed Chicago IL 60680 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Utility Service** Is the claim subject to offset? **☑** No ☐ Yes 4.5 \$10,000.00 Department of Education/Nelnet Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3015 Parker Rd Suite 400 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **Aurora** CO 80014 City 7IP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Student loan Is the claim subject to offset? No Yes

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 25 of 69

Debtor 1 Kayel Michelle Ellis Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$3.500.00 **Discover** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Greenwood Trust Comp Number As of the date you file, the claim is: Check all that apply. P.O.Box 6000 ☐ Contingent Unliquidated Disputed Dover 19903-6000 DE ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П 4.7 \$300.00 Last 4 digits of account number **Equifax** Nonpriority Creditor's Name When was the debt incurred? 11601 Roosevelt Blvd As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed 33716 Saint Petersburg FL City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for -Is the claim subject to offset? **☑** No ☐ Yes 4.8 \$300.00 **First Premier Bank** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O.Box 5519 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated ☐ Disputed 57117-5519 Sioux Falls SD 7IP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No Yes

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 26 of 69

Debtor 1 Kayel Michelle Ellis Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.9 \$300.00 **Guaranty Bank** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 240200 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Milwaukee WI 53223 ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Other Is the claim subject to offset? **☑** No Yes П 4.10 \$91.00 Last 4 digits of account number **Merchants Credit Associations** Nonpriority Creditor's Name When was the debt incurred? 4110 Clemson Blvd Ste A Number As of the date you file, the claim is: Check all that apply. Street Contingent Unliquidated Disputed **Anderson** SC 29621 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for - Chicago Imaging Associates Is the claim subject to offset? **☑** No ☐ Yes 4.11 \$500.00 **Peoples Gas** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/k/a People's Energy As of the date you file, the claim is: Check all that apply. Street Number 200 E. Randoph Contingent ☐ Unliquidated ☐ Disputed Chicago 60687-6207 IL State **ZIP Code** Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Utility Is the claim subject to offset? No Yes

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 27 of 69

Debtor 1 Kayel Michelle Ellis Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.12 \$300.00 **PNC Bank** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2730 Liberty Ave. As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Pittsburgh PA 15222 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Loan Is the claim subject to offset? **☑** No Yes П 4.13 \$261.00 Last 4 digits of account number Sprint Nonpriority Creditor's Name When was the debt incurred? P.O.Box 600760 As of the date you file, the claim is: Check all that apply. Street Contingent Unliquidated Disputed **Jacksonville** 32260-0670 FL City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Utility Is the claim subject to offset? **☑** No ☐ Yes 4.14 \$300.00 St. Mary of Nazareth Hospital Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2233 W. Division St. As of the date you file, the claim is: Check all that apply. Street Number Chicago, IL Contingent Unliquidated Disputed City 7IP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt medical Is the claim subject to offset? No Yes

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 28 of 69

Debtor 1 Kayel Michelle Ellis Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.15 \$285.00 State Collection Service Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 6250 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Madison WI 53701 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for -PBC Dept. of Radiology Is the claim subject to offset? **☑** No Yes П 4.16 \$300.00 TCF Bank Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 800 Burr Ridge Parkway As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed **Burr Ridge** IL 60521 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Other Is the claim subject to offset? **☑** No ☐ Yes 4.17 \$300.00 Verizon Wireless Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1515 Woodfield Rd. As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **Schaumburg** IL 60173 State 7IP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Cellular Phone Is the claim subject to offset? No Yes

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 29 of 69

Debtor 1	Kayel First Name		lichelle iddle Name	Ellis Last Name	Case number (if known)
Part 3:	List Others to	о Ве	Notified Abou	ut a Debt That You Alread	y Listed
For exa credito debts t	ample, if a collection or in Parts 1 or 2, th	on ag nen li arts	ency is trying to st the collection a I or 2, list the add	collect from you for a debt you igency here. Similarly, if you h itional creditors here. If you do	r a debt that you already listed in Parts 1 or 2. owe to someone else, list the original ave more than one creditor for any of the o not have additional parties to be notified for
	vealth Edison			On which entry in Part 1 or	Part 2 did you list the original creditor?
Name Bill Payme	ent Center			Line 4.4 of (Check one).	Part 1: Creditors with Priority Unsecured Claims
	Street				Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account num	nber
Chicago City	IL Si	tate	60668-0001 ZIP Code	_	
ERC				On which entry in Part 1 or	Part 2 did you list the original creditor?
Name 8014 Bayb	erry Rd			Line of (Check one).	Part 1: Creditors with Priority Unsecured Claims
	Street			Collecting for - Sprint	Part 2: Creditors with Nonpriority Unsecured Claims
 Jacksonvi	ille F	<u> </u>	33256	 Last 4 digits of account nun 	nber
City	-	tate	ZIP Code	_	

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 30 of 69

Debtor 1	Kayel	Michelle	Ellis	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🛨	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$18,937.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$18,937.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 31 of 69

ormation to ide	ntify your case:			
Kayel First Name	Michelle Middle Name	Ellis Last Name		
First Name	Middle Name	Last Name		
nkruptcy Court for th	e: NORTHERN DI S	STRICT OF ILLINOIS		
				Check if this is an amended filing
	Kayel First Name First Name	First Name Middle Name First Name Middle Name	Kayel Michelle Ellis First Name Middle Name Last Name	Kayel Michelle Ellis First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 32 of 69

Fill in this in	formation to i	dentify your case	:	
Debtor 1	Kayel	Michelle	Ellis	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	j) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	or the: NORTHERN D	DISTRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
				g
Official Forn	a 106U			
		_		
Schedule H	l: Your Cod	ebtors		
wo married peo	ple are filing toge	ether, both are equally	responsible for supplying corr	as complete and accurate as possible. If rect information. If more space is ne left. Attach the Additional Page to this
two married peo needed, copy the page. On the top	ple are filing toge Additional Page	ether, both are equally e, fill it out, and numbe al Pages, write your n	responsible for supplying corr	rect information. If more space is ne left. Attach the Additional Page to this n). Answer every question.
two married peoneeded, copy the page. On the top 1. Do you have No Yes Within the la	ple are filing toge e Additional Page o of any Addition e any codebtors? ast 8 years, have	ether, both are equally e, fill it out, and numbe al Pages, write your n (If you are filing a jo you lived in a commu	r responsible for supplying correct the entries in the boxes on the lame and case number (if known with the case, do not list either spouse	rect information. If more space is the left. Attach the Additional Page to this in). Answer every question. e as a codebtor.) To (Community property states and territories)
two married peoneeded, copy the page. On the top 1. Do you have No Yes 2. Within the lainclude Arizo	ple are filing toge e Additional Page o of any Addition e any codebtors? ast 8 years, have ona, California, Ida to line 3. id your spouse, fo	ether, both are equally a, fill it out, and number all Pages, write your note (If you are filing a journ you lived in a commusho, Louisiana, Nevada	responsible for supplying correct the entries in the boxes on the ame and case number (if known int case, do not list either spouse unity property state or territory?	rect information. If more space is the left. Attach the Additional Page to this in). Answer every question. The as a codebtor.) The (Community property states and territories is, Washington, and Wisconsin.)

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 33 of 69

FIII III UIIS IIIIOIII	ation to identi	fy your case:				
Debtor 1	Kayel	Michelle	Ellis			
	First Name	Middle Name	Last Name		Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		· 🗖	An amended filing
United States Bankr	uptcv Court for the	NORTHERN	DISTRICT OF IL	LINOIS		A supplement showing postpetition
Case number					.	chapter 13 income as of the following date
(if known)						MM / DD / YYYY
Official Form 10	61					
Schedule I: Yo	ur Income					12/1
about your spouse. If your name and case n	more space is ne	eded, attach a se Answer every q	eparate sheet to th	•	-	rou, do not include information any additional pages, write
I. Fill in your emplo information.	yment		Debtor 1			Debtor 2 or non-filing spouse
If you have more the		oyment status	Employed			☐ Employed
job, attach a separ with information ab	ato page .	Syment Status	☐ Not employed	ed		☐ Not employed
additional employe	ers. Occu	pation	Personnal Ass	istant		_
Include part-time, s or self-employed w		oyer's name	State of Illinois	Department	of Reh	aa
Occupation may in student or homema applies.	p.	oyer's address	Number Street			Number Street
			City	State Zip	Code	City State Zip Code
			•	·		·
	Ua	lana amplayad ti	hara 2voare			
	How	long employed tl	here? <u>2years</u>			
Part 2: Give D	How Petails About M					
Estimate monthly inco	etails About M	onthly Incom	e	ing to report for a	any line	e, write \$0 in the space. Include your
Estimate monthly inco non-filing spouse unless f you or your non-filing	etails About Mome as of the date s you are separated spouse have more	onthly Incom you file this form i. than one employe	n. If you have noth			e, write \$0 in the space. Include your
Estimate monthly inco non-filing spouse unless f you or your non-filing	etails About Mome as of the date s you are separated spouse have more	onthly Incom you file this form i. than one employe	n. If you have noth		mploye	
Estimate monthly inco	me as of the date s you are separate spouse have more attach a separate s	onthly Incom you file this form d. than one employment to this form.	n. If you have noth er, combine the info	For Debto	mploye	rs for that person on the lines below. If
Estimate monthly inconon-filing spouse unless fyou or your non-filing you need more space, at the conon space. At the conon space is a spayroll deductions in the conon spayroll deductions in the conon spayroll deductions.	pretails About Mome as of the date is you are separated spouse have more attach a separate set wages, salary, and if not paid month.	you file this form. than one employment to this form. and commissions ly, calculate what	n. If you have noth er, combine the info	For Debto	mploye	rs for that person on the lines below. If

Official Form 106I Schedule I: Your Income page 1

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 34 of 69

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00	Deb	tor 1	Kayel	Michelle	Ellis		Case nu	mber (i	f known)		
Copy line 4 here			First Name	Middle Name	Last Name	ı	For Debtor 1			ie.	
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. So.00 5d. Required repayments of retirement fund loans 5d. So.00 5e. Insurance 5d. So.00 5d. Insurance 5d. So.00 5d. Insurance 5d. So.00 5d. No.00 5d. Union dues 5d. So.00 5d. No.00 5d. Union dues 5d. So.00 5d. No.00 5d. Union dues 5d. So.00 5d. So.00 5d. One deductions. Specify 6d. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. S486.00 5g + 5h. Other deductions. 5g + 5h. Other commerce gularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, cordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8d. So.00il Security 8e. \$0.00 8f. Other government assistance that you regularly receive include eash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8d. \$0.00 8d. \$0.00 9d. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9 \$0.00 10. Calculate monthly income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 11. * \$0.00 12. Add the entries in ine 10 for Debtor 1 or non-filing spouse. 13. State all other regular contributions to the expenses that you list in Schedule J. Include on thirbuitons from an unmarried partner, members of your household, your dependents, your roommates, and other friends or retailves. Do not in		C = =	u lina 4 hava		•	_	£2.000.00		illing opouc	<u> </u>	
Sa. Tax, Medicare, and Social Security deductions 5a. Mandatory contributions for retirement plans 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. So. 0.00 5d. 80.00 5d. 80.00 5d. \$0.00 5f. Domestic support obligations 5f. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$68.00 5h. Other deductions. Specify: 5g. Union dues 6h. Other deductions. Specify: 5g. 4b. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,514.00 6l. Islat all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly retire income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly received: Include alimony, spousal support, child support, maintenance, vironce settlement, and properly settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) or any non-cash assistance that you receive; such as food stamps (herefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9 \$0.00 9. Add all other income. Add lines 8a + 8b + 8c - 8d + 8e + 8f + 8g + 8h. 10. \$11,514.00 11. \$11,14 + \$0.00 12. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or retalives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried	_	-	-		······································	4.	\$2,000.00	_			
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Nountry contributions for retirement plans 5c. Insurance 5c. Insurance 5c. Insurance 5c. S0.00 5c. Insurance 5c. S0.00 5c. Insurance 5c. S0.00 5c. S0.00 5c. Union dues 5c. Domestic support obligations 5c. S0.00 5c. Union dues 5c. S0.00 5c. S0.	5.				duations	Eo	¢419.00				
5c. Voluntary contributions for retirement plans 5c. Required repayments of retirement fund loans 5d. S0.00 5d. S0.00 5f. Domestic support obligations 5f. Domestic support obligations 5g. Union dues 5g. S68.00 5h. Other deductions. Specify: 5p. Specify: 5p. Specify: 5p. Solon dues 5p. So				•				_			
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. Union duce 5f. Domestic support obligations 5g. Union duce 5g. \$68.00 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines \$a + 5b + 5c + 5d + 5e + 5f + 6. \$486.00 5g + 5h. 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines \$a + 5b + 5c + 5d + 5e + 5f + 6. \$486.00 5g + 5h. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly end income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include adiamony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. \$1,514.00 +								_			
Se. Insurance Sf. Domestic support obligations Sf. Other deductions. Specify: Sh. Other deductions. Specify: Sh. Other deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$486.00 Specify: Sh.			-		•			_			
5f. Domestic support obligations 5g. Unlion dues 5h. Other deductions. Specify: 6h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+ 6. \$486.00 5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,514.00 8l. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$0.00 8e. \$0.00 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. \$1,514.00 +		_		ayments of retirement it	illu loalis			_			
5g. Union dues 5h. Other deductions. Specify: 5h. + \$0.00 6h. + \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,514.00 8. List all other income regularly received: 8. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$0.00 9. Add all other income. Add line 7 + line 9.				nnort obligations				_			
Sh. Other deductions. Specify: 5pecify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$486.00 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,514.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Specify: Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 Calculate monthly income and main an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 Combined monthly income. Wife that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information. 12. Add the amount in the last column of line 10 to the amount in line 11. The result			-	oport obligations				_			
Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$486.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,514.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. \$0.00 8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. † \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. Combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		•		ions		og.		_			
s ₅ + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,514.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8h. Other monthly income. Specify: 8f. \$0.00 8h. \$0.00 9. Add all other income. Add line 8 a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarned partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4 \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		•		.01101		5h. +	\$0.00	_			
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 13. Do you expect an increase or decrease within the year after you file this form?	6.			eductions. Add lines 5a	a + 5b + 5c + 5d + 5e + 5f +	6.	\$486.00	_			
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 13. Do you expect an increase or decrease within the year after you file this form?	7.	Calc	culate total mo	onthly take-home pay.	Subtract line 6 from line 4.	7.	\$1,514.00				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$pecify: 8g. \$0.00 8h. Other monthly income. \$pecify: 8h. \$0.00 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. * \$0.00 Combined monthly income. Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 13. Do you expect an increase or decrease within the year after you file this form?	8.	List	all other inco	me regularly received:				_			
gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8h. Other monthly income. 8g. \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 9. Add all other income. Add lines 7 + line 9. 10. \$1,514.00 +		8a.			from operating a	8a.	\$0.00	_			
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. \$0.00 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 9. Add all other rincome. Add lines 7 + line 9. 10. \$1,514.00 + = \$1,514.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,514.00 + = \$1,514.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 Combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. \$1,514.00 Combined monthly income. None.			gross receipts	s, ordinary and necessary	ğ .						
dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income. Add line 8 a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 Combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		8b.	Interest and o	dividends		8b.	\$0.00				
divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$pecify: 8f. \$0.00 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. \$1,514.00 +		8c.			non-filing spouse, or a	8c.	\$0.00	_			
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 Specify: 11. + \$0.00 Combined monthly income. Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. No. None.				• •							
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. No. None.		8d.	Unemployme	nt compensation		8d.	\$0.00				
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. No. None.		8e.	Social Securi	ity		8e.	\$0.00				
cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. No. None.		8f.	Other govern	ment assistance that yo	u regularly receive						
8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. No. None.			cash assistand (benefits unde	ce that you receive, such er the Supplemental Nutrit	as food stamps						
8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. No. None.			Specify:			8f.	\$0.00				
Specify: 8h.+ \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,514.00 + = \$1,514.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00		8g.	Pension or re	etirement income		8g.	\$0.00				
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 \$ 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,514.00 + = \$1,514.00 + = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,514.00 = \$1,51		8h.	Other monthl	y income.				_			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 13. Do you expect an increase or decrease within the year after you file this form? No. None.			Specify:			8h. +	\$0.00	_			
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 13. Do you expect an increase or decrease within the year after you file this form? No. None.	9.	Add	l all other inco	me. Add lines 8a + 8b +	8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00				
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 13. Do you expect an increase or decrease within the year after you file this form? No. None.	10.					10.	\$1,514.00	+]=[\$1,514.00
Specify: 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. \$1,514.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? No. None.	11.	Inclu	ude contribution	ns from an unmarried part				ır room	ımates, and o	ther	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. \$1,514.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? No. None.		Do r	not include any	amounts already included	in lines 2-10 or amounts that	t are no	ot available to pay	expens	es listed in S	chedı	ıle J.
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. \$1,514.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? No. None.		Sne	cify.						11	+	\$0.00
income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. Combined monthly incom To you expect an increase or decrease within the year after you file this form? No. None.		Opc	ony						'''	. г	
13. Do you expect an increase or decrease within the year after you file this form? V No. None.	12.	inco	me. Write that								
☑ No. None.	13	Dos	voll expect an	increase or decrease wi	thin the year after you file th	his form	m?			ľ	nontiny income
			•		ami ano your anter you me ti	1011	•••			—	
				Notice.							

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 35 of 69

F	ill in this inforn	nation to ide	ntify your case:		Ch	ook if this	io	
	Debtor 1	Kayel	Michelle	Ellis		eck if this An ame	ended filing	
		First Name	Middle Name	Last Name		١ .	lement showing	postpetition
	Debtor 2					chapter followin	r 13 expenses a	s of the
	(Spouse, if filing)	First Name	Middle Name	Last Name		IOIIOWII	ig date.	
	United States Bank	ruptcy Court for t	the: NORTHERN DI	STRICT OF ILLING	DIS	MM / D	D / YYYY	_
	Case number (if known)							
Of	ficial Form 10)6 <u>J</u>						
Sc	hedule J: Yo	our Expens	ses					12/15
cor	rect information. I	f more space is	sible. If two married po needed, attach anothe nswer every question usehold	er sheet to this form				
1.	Is this a joint cas	e?						
2.	_ No	Debtor 2 live in a	a separate household? t file Official Form 106J	-2, Expenses for Sep				
	Do not list Debtor	1 and	Yes. Fill out this integrated for each dependent	Debtor	dent's relationsh r 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
	Debtor 2.			<u>Daugl</u>	hter		2	□ No - 📝 Yes
	Do not state the d names.	ependents'		<u>Daugl</u>	hter		10	□ No □ Yes
								No Yes No Yes No No No No
								Yes
3.	Do your expense expenses of peopourself and you	ple other than	☑ No ☐ Yes					
Р	art 2: Estima	ate Your Onc	joing Monthly Exp	enses				
to r		of a date after	ankruptcy filing date u the bankruptcy is filed				-	
			ash government assis on Schedule I: Your II				Your expens	es
4.			xpenses for your residence any rent for the groun			2	4.	\$500.00
	If not included in	line 4:						
	4a. Real estate t	axes				4	4a	
	4b. Property, hor	neowner's, or rer	nter's insurance			2	4b	
	4c. Home mainte	enance, repair, a	nd upkeep expenses			2	4c	
	4d Homeowner's	s association or o	condominium dues			2	4d.	

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 36 of 69

Case number (if known)

Ellis

Middle Name Last Name First Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and 6c. cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$300.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services 10. \$29.00 11. Medical and dental expenses 11. \$75.00 12. Transportation. Include gas, maintenance, bus or train 12. \$125.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$25.00 magazines, and books 14. Charitable contributions and religious donations 14 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance 15c 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: child and after school care 17c. \$360.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

Debtor 1 Kayel

Michelle

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 37 of 69

Deb	tor 1	Kayel	Michelle	Ellis	Case number (if kno	wn)
		First Name	Middle Name	Last Name		
20.		er real property e edule I: Your Inc		lines 4 or 5 of this form or	r on	
	20a.	Mortgages on o	other property	20a.		
	20b.	Real estate tax	es	20b.		
	20c.	Property, home	eowner's, or renter's insura	nce	20c.	
	20d.	Maintenance, r	epair, and upkeep expense	es	20d.	
	20e.	Homeowner's a	association or condominium	n dues	20e.	
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your mont	hly expenses.			
	22a.	Add lines 4 thro	ough 21.		22a.	\$1,514.00
	22b.	Copy line 22 (n	nonthly expenses for Debto	or 2), if any, from Official Fo	rm 106J-2. 22b.	
	22c.	Add line 22a ar	nd 22b. The result is your	monthly expenses.	22c.	\$1,514.00
23.	Calc	ulate your mont	hly net income.			
	23a.	Copy line 12 (y	our combined monthly inco	ome) from Schedule I.	23a.	\$1,514.00
	23b.	Copy your mon	thly expenses from line 22	c above.	23b.	\$1,514.00
	23c.	Subtract your n The result is yo	nonthly expenses from you our monthly net income.	ır monthly income.	23c.	\$0.00
24.	Do y	ou expect an inc	crease or decrease in you	ur expenses within the yea	ar after you file this form?	
	payn			your car loan within the year nodification to the terms of y	or do you expect your mortgage your mortgage?	
	Ö	Yes. Explain he None.	re:			

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 38 of 69

First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	Fill in this information to identify your case:							
Debtor 2	Debtor 1							
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number								
Case number								

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

E	Part 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$775.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$775.00
P	Part 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$41,324.23
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$18,937.00
	Your total liabilities	\$60,261.23
F	Part 3: Summarize Your Income and Expenses	_
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,514.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,514.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 39 of 69

Deb	tor 1	Kayel	Michelle	Ellis	Case number (if known)		
		First Name	Middle Name	Last Name			
Pá	art 4:	Answer T	hese Questions fo	r Administrativ	e and Statistical Records		
6.	Are y	you filing for bar	nkruptcy under Chapter	rs 7, 11, or 13?			
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 						
7.	Wha	t kind of debt do	you have?				
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
	_		not primarily consumer ourt with your other sche		othing to report on this part of the form. Check	k this box and submit	
8.			of Your Current Month! Line 11; OR, Form 122B	•	ur total current monthly income from 122C-1 Line 14.	\$2,567.00	
9.	Сору	y the following s	pecial categories of cla	ims from Part 4, lir	ne 6 of Schedule E/F:		
					Total claim		

From Part 4 on Schedule E/F, copy the following:							
9a. Domestic support obligations. (Copy line 6a.)	\$0.00						
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00						
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00						
9d. Student loans. (Copy line 6f.)	\$0.00						
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00						
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00						
9g. Total. Add lines 9a through 9f.	\$0.00						

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 40 of 69

Fill in this information to identify your case:						
Debtor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number (if known)						
Official Form 106Dec						

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
☑ No								
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are							
true and correct.								
X /s/ Kayel Michelle Ellis	_ X							
Kayel Michelle Ellis, Debtor 1	Signature of Debtor 2							
Date <u>07/25/2016</u> MM / DD / YYYY	Date							

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 41 of 69

Fill in this information to identify your case:	
Debtor 1 Kayel Michelle Ellis	
First Name Middle Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number	
(if known)	Check if this is an amended filing
Official Form 107	
Statement of Financial Affairs for Individuals Filing for Ban	kruptcy 0
natement of i manetal Analis for marviduals i ming for ban	Riupicy
our name and case number (if known). Answer every question.	
Part 1: Give Details About Your Marital Status and Where You Lived . What is your current marital status?	I Before
Part 1: Give Details About Your Marital Status and Where You Lived	l Before
Part 1: Give Details About Your Marital Status and Where You Lived . What is your current marital status? Married	I Before
Part 1: Give Details About Your Marital Status and Where You Lived . What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now?	
Part 1: Give Details About Your Marital Status and Where You Lived . What is your current marital status? ☐ Married ☐ Not married . During the last 3 years, have you lived anywhere other than where you live now? ☐ No	e now. nunity property state or territory?

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 42 of 69

Deb	otor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name	Case nur	mber (if known)	
P	art 2:	•	e Sources of Yo				
4.	Fill in th	ne total amount o	of income you receiv	ent or from operating a bured from all jobs and all busticome that you receive toge	inesses, including part		endar years?
	✓ Yes	s. Fill in the deta	ails.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the curr u filed for bankr	-	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$15,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		calendar year: December 31,	<u>2015</u>)	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$26,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		ndar year before December 31,		✓ Wages, commissions, bonuses, tips☐ Operating a business	\$19,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
5.	Include unempl and gar Debtor List eac	income regardle oyment; and oth mbling and lotter 1.	ess of whether that in er public benefit pay y winnings. If you a	ments; pensions; rental inc	s of other income are ome; interest; dividend ave income that you re	alimony; child support; Socia ds; money collected from law eceived together, list it only co that you listed in line 4.	vsuits; royalties;
	✓ No	Fill in the deta	aile				

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 43 of 69

		Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)						
_	- 10				Elled Co. Book of a						
. F	Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts?										
) .	□ No.	Neither Del	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as								
		,	"incurred by an individual primarily for a personal, family, or household purpose."								
		-	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?								
		_	No. Go to line 7.								
		tot	al amount you paid that	creditor. Do not inc	tal of \$6,425* or more in one or more payments and the lude payments for domestic support obligations, such as e payments to an attorney for this bankruptcy case.						
		* Subject to	adjustment on 4/01/19	and every 3 years af	ter that for cases filed on or after the date of adjustment.						
	∀ Yes	. Debtor 1 or	Debtor 2 or both have	primarily consume	er debts.						
		During the 9	00 days before you filed	for bankruptcy, did y	ou pay any creditor a total of \$600 or more?						
✓ No. Go to line 7.											
		cre		ayments for domesti	tal of \$600 or more and the total amount you paid that c support obligations, such as child support and alimony. or this bankruptcy case.						
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.										
	✓ No ☐ Yes	. List all paym	ents to an insider.								
3.	benefite	ed an insider?			y payments or transfer any property on account of a debt that						
		payments on o	lebts guaranteed or cosi	gried by arr irisider.							
	✓ No ☐ Yes	. List all paym	ents that benefited an ir	nsider.							
D	art 4:	Identify I	egal Actions, Repo	neeneeinne and	Foroclosures						
_											
€.	List all s	such matters, ir	•	• • • •	in any lawsuit, court action, or administrative proceeding? actions, divorces, collection suits, paternity actions, support or custody						
	☑ No ☐ Yes	. Fill in the def	tails.								

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 44 of 69

Deb	otor 1	Kayel First Name		Michelle Middle Name	Ellis Last Name	Case number (if k	known)		
10.	seized	1 year before, or levied? all that apply a	•	•		property repossessed, foreclose	d, garnished, attach	ed,	
	_	. Go to line 11 s. Fill in the in		on below.					
11.	 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? 								
	✓ No	s. Fill in the de	etails.						
12.					otcy, was any of your pustodian, or another o	property in the possession of an fficial?	assignee for the be	nefit of	
	✓ No □ Ye								
Ρ	art 5:	List Cert	ain Gi	fts and Con	tributions				
13.	Within	2 years befor	e you fi	led for bankrı	ıptcy, did you give any	gifts with a total value of more	than \$600 per perso	n?	
	✓ No	s. Fill in the de	etails foi	r each gift.					
14.		2 years befor charity?	e you fi	led for bankru	ıptcy, did you give any	gifts or contributions with a tot	al value of more tha	n \$600	
	✓ No □ Ye	s. Fill in the de	etails foi	each gift or co	ontribution.				
Р	art 6:	List Cert	ain Lo	sses					
15.		1 year before lisaster, or ga	-	-	otcy or since you filed	for bankruptcy, did you lose any	thing because of th	eft, fire,	
	✓ No	s. Fill in the de	etails.						
Р	art 7:	List Cert	ain Pa	yments or	Transfers				
16.	anyone	you consulte	ed abou	it seeking ban	kruptcy or preparing a	e else acting on your behalf pay a bankruptcy petition? seling agencies for services requir		-	
	□ No		, barner	proy permon p	reparers, or orealt court	seming agentices for services require	ca for your bankrapa	, y.	
		s. Fill in the de	etails.						
							Amount of payment		
	l W. Ja c nber St	ckson, Suite reet	202				07/23/2016	\$399.00	
Ch i	icago		IL State	60607 ZIP Code				-	
Ema	ail or webs	ite address							
Doro	an Mha N	Made the Paymen	t if Not V	/ou					

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 45 of 69

Deb	• • • • • • • • • • • • • • • • • • • •	Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)	
17.	anyone	•	elp you deal with y	our creditors or to	else acting on your behalf pay or transfer any property to make payments to your creditors?	
	☑ No	Fill in the details.	or transfer that you	iisted on line 16.		
18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other t property transferred in the ordinary course of your business or financial affairs?						
		ooth outright transfer nclude gifts and trans			as granting of a security interest or mortgage on your property). s statement.	
	✓ No ☐ Yes.	Fill in the details.				
19.		0 years before you a beneficiary? (T	•		any property to a self-settled trust or similar device of which devices.)	
	✓ No ☐ Yes.	Fill in the details.				
Pa	art 8:	List Certain Fi	nancial Accoun	ts, Instruments	s, Safe Deposit Boxes, and Storage Units	
20.		year before you file closed, sold, move		were any financial	accounts or instruments held in your name, or for your	
		checking, savings, m pension funds, coop	•		s; certificates of deposit; shares in banks, credit unions, brokerage ial institutions.	
	✓ No ☐ Yes.	Fill in the details.				
21.	-	now have, or did yo rities, cash, or othe	-	ar before you filed	for bankruptcy, any safe deposit box or other depository	
	✓ No ☐ Yes.	Fill in the details.				
22.	Have yo ✓ No	u stored property i	n a storage unit or	place other than ye	our home within 1 year before you filed for bankruptcy?	
		Fill in the details.				
Pá	art 9:	Identify Proper	rty You Hold or	Control for So	meone Else	
23.		hold or control any in trust for someon		eone else owns? I	nclude any property you borrowed from, are storing for,	
	✓ No ☐ Yes.	Fill in the details.				

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 46 of 69

Debto	or 1	Kayel	Michelle	Ellis	Case number (if known)
		First Name	Middle Name	Last Name	
Par	rt 10:	Give Details	s About Environr	mental Informat	tion
or th	ne purp	oose of Part 10, t	the following definition	ons apply:	
ha	zardo	us or toxic subst	ance, wastes, or ma	terial into the air, la	regulation concerning pollution, contamination, releases of and, soil, surface water, groundwater, or other medium, se substances, wastes, or material.
		-	facility, or property operate, or utilize it,		any environmental law, whether you now own, operate, or I sites.
			ns anything an envir aterial, pollutant, cor		nes as a hazardous waste, hazardous substance, toxic ar item.
Repo	rt all n	otices, releases,	and proceedings the	at you know about	, regardless of when they occurred.
	Has an	y governmental	unit notified you that	t you may be liable	or potentially liable under or in violation of an environmental
	☑ No □ Yes	s. Fill in the detai	ls.		
	-	ou notified any g	overnmental unit of	any release of haz	ardous material?
	☑ No □ Yes	s. Fill in the detai	ls.		
	Have you		in any judicial or adn	ninistrative procee	ding under any environmental law? Include settlements and
	☑ No □ Yes	s. Fill in the detai	ls.		
Par	rt 11:	Give Details	s About Your Bu	siness or Conn	ections to Any Business
	Within busine		ou filed for bankrupt	cy, did you own a	business or have any of the following connections to any
		A member of a A partner in a p An officer, direc	limited liability compa	ny (LLC) or limited li	
]]			ove applies. Go to Parapply above and fill in		or each business.
		-	ou filed for bankrupt , creditors, or other		financial statement to anyone about your business? Include
	□ No □ Yes	s. Fill in the detai	ls below.		

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 47 of 69

Debtor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name	Case number (if known)
Part 12	Sign Belov	v		
that answ property b	ers are true and only fraud in conne	correct. I understand t	hat making a false state	tachments, and I declare under penalty of perjury ement, concealing property, or obtaining money or es up to \$250,000, or imprisonment for up to 20 years,
X /s/ Ka	yel Michelle Elli	s	X	
Kayel N	Michelle Ellis, Debt	or 1	Signature of Deb	tor 2
Date .	07/25/2016		Date	
Did you a	ttach additional p	ages to Your Statemer	nt of Financial Affairs for	r Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes				
Did you p	ay or agree to pay	y someone who is not	an attorney to help you	fill out bankruptcy forms?
☑ No				
	Name of person _			Attach the Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 48 of 69

Fill in this info	ormation to	identify your case	:
Debtor 1	Kayel First Name	Michelle Middle Name	Ellis Last Name
Debtor 2	. not reame	made Name	Lactivanie
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS
Case number (if known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: **List Your Creditors Who Hold Secured Claims**

••	fill in the infor	mation below.	Orcuito	10 Who Hold Olding Occured by 1 Top	, crty (omolari om 1005),
	Identify the creditor and the property that is collateral			at do you intend to do with the perty that secures a debt?	Did you claim the property as exempt on Schedule C?	
	Creditor's	Car finance		Surrender the property.		No
	name:			Retain the property and redeem it.		Yes
	Description of	2014 Chevy Camaro		Retain the property and enter into a		
	property		_	Reaffirmation Agreement. Retain the property and [explain]:		
	securing debt:			retain the property and [explain].		
	Creditor's	Santander Consumer USA	$\overline{\mathbf{A}}$	Surrender the property.		No
	name:			Retain the property and redeem it.		Yes
	Description of	2010 Chevy Malibu		Retain the property and enter into a		
	nronerty		_	Reaffirmation Agreement.		

Retain the property and [explain]:

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D)

property

securing debt:

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 49 of 69

Debtor 1	Kayel	Michelle	Ellis	Case number (if known)
	First Name	Middle Name	Last Name	
Part 2:	List Your	Unexpired Person	al Property Lease	es
fill in the i	nformation belo	w. Do not list real esta	ate leases. <i>Unexpire</i> d	e G: Executory Contracts and Unexpired Leases (Official Form 106G), I leases are leases that are still in effect; the lease period has not the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Desci	ribe your unexpi	red personal property	leases	Will this lease be assumed?
None) .			
Part 3:	Sign Belo	w		
		ry, I declare that I have is subject to an unexp	•	on about any property of my estate that secures a debt and
X /s/ Kay	el Michelle Ell	lis	X	
Kayel M	lichelle Ellis, Deb	otor 1	Signature of I	Debtor 2
-	7/25/2016	_	Date	
N	MM / DD / YYYY		MM / D	DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee

\$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 54 of 69

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	re Kayel Michelle Ellis	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	ORNEY FOR	DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition is services rendered or to be rendered on behalf of the debtor(s) in contemplation is as follows:	n bankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept		1,200.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due	<u> </u>	1,200.00
2.	. The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	✓ Debtor		
4.	. I have not agreed to share the above-disclosed compensation with any o associates of my law firm.	other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with another passociates of my law firm. A copy of the agreement, together with a list o compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render legal service for	r all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor bankruptcy;	otor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and	plan which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirmation h	nearing, and any	adjourned hearings thereof;

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 55 of 69

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/25/2016

/s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates Robert J. Adams & Associates 901 W. Jackson, Suite 202 Chicago, IL 60607

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Kayel Michelle Ellis

Kayel Michelle Ellis

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 56 of 69

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Kayel Michelle Ellis CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

1	he above named	Debtor hereb	y verifies th	at the atta	ched list o	f creditors i	s true and	I correct to t	he best o	f his/her
knowled	dge.									

Date <u>7/25/2016</u>	Signature _/s/ Kayel Michelle Ellis
	Kayel Michelle Ellis
Date	Signature

AT&T PO Box 8212 Aurora, IL 60572

Bank of America PO Box 1598 Norfolk, VA 23501

Car finance PO Box 660057 Dallas, TX 75266-0057

Comcast PO Box 3002 Southeastern, PA 19398

ComEd Customer Care Center P.O.Box 87522 Chicago, IL 60680

Commonwealth Edison Bill Payment Center Chicago, IL 60668-0001

Department of Education/Nelnet 3015 Parker Rd Suite 400 Aurora, CO 80014

Discover Greenwood Trust Comp P.O.Box 6000 Dover, DE 19903-6000

Equifax 11601 Roosevelt Blvd Saint Petersburg, FL 33716

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 58 of 69

ERC 8014 Bayberry Rd Jacksonville, FL 33256

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519

Guaranty Bank PO Box 240200 Milwaukee, WI 53223

Merchants Credit Associations 4110 Clemson Blvd Ste A Anderson , SC 29621

Peoples Gas n/k/a People's Energy 200 E. Randoph Chicago, IL 60687-6207

PNC Bank 2730 Liberty Ave. Pittsburgh, PA 15222

Santander Consumer USA PO Box 961245 FT Worth, TX 76161

Sprint
P.O.Box 600760
Jacksonville, FL 32260-0670

St. Mary of Nazareth Hospital 2233 W. Division St. Chicago, IL

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 59 of 69

State Collection Service PO Box 6250 Madison, WI 53701

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

Verizon Wireless 1515 Woodfield Rd. Schaumburg, IL 60173

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Northern district of illinois Document Page 60 of 69 EASTERN DIVISION (CHICAGO)

AT&T PO Box 8212 Aurora, IL 60572

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519

Verizon Wireless 1515 Woodfield Rd. Schaumburg, IL 60173

Bank of America PO Box 1598 Norfolk, VA 23501

Guaranty Bank PO Box 240200 Milwaukee, WI 53223

Car finance PO Box 660057 Dallas, TX 75266-0057

Merchants Credit Associations 4110 Clemson Blvd Ste A Anderson , SC 29621

Comcast PO Box 3002 Southeastern, PA 19398

Peoples Gas n/k/a People's Energy 200 E. Randoph Chicago, IL 60687-6207

ComEd Customer Care Center P.O.Box 87522 Chicago, IL 60680

PNC Bank 2730 Liberty Ave. Pittsburgh, PA 15222

Commonwealth Edison
Bill Payment Center
Chicago, IL 60668-0001

Santander Consumer USA PO Box 961245 FT Worth, TX 76161

Department of Education/Nelnet Sprint 3015 Parker Rd Suite 400 P.O.Box 600760 Aurora, CO 80014

Jacksonville, FL 32260-0670

Discover Greenwood Trust Comp P.O.Box 6000 Dover, DE 19903-6000

St. Mary of Nazareth Hospital 2233 W. Division St. Chicago, IL

Equifax 11601 Roosevelt Blvd PO Box 6250
Saint Petersburg, FL 33716 Madison, WI 53701

State Collection Service

ERC 8014 Bayberry Rd Jacksonville, FL 33256

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

IN RE: Kayel Michelle Ellis CASE NO

CHAPTER 7

Scheme Selected: State

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$300.00	\$0.00	\$300.00	\$300.00	\$0.00
7.	Electronics	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$250.00	\$0.00	\$250.00	\$250.00	\$0.00
12.	Jewelry	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$25.00	\$0.00	\$25.00	\$25.00	\$0.00
17.	Deposits of money	\$200.00	\$0.00	\$200.00	\$200.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

IN RE: Kayel Michelle Ellis CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

TOTALS:

value	s and liens of surrendered property are NO		·			Scheme Selected: State		
No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt		
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
48.	Cropseither growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

\$775.00

\$0.00

\$775.00

\$775.00

\$0.00

IN RE: Kayel Michelle Ellis CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
Real Property (None)			
Personal Property			
2014 Chevy Camaro	\$0.00	\$28,270.00	\$0.00
2010 Chevy Malibu	\$0.00	\$13,054.23	\$0.00
TOTALS:	\$0.00	\$41,324.23	\$0.00

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description Market Value Lien Equity Non-Exempt Amount		Property Description	Market Value	Lien	Equity	Non-Exempt Amount
-----------------------------------------------------------------	--	----------------------	--------------	------	--------	-------------------

Real Property

(None)

Personal Property

(None)

TOTALS: \$0.00 \$0.00 \$0.00 \$0.00

Summary	
A. Gross Property Value (not including surrendered property)	\$775.00
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$775.00
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00
E. Gross Amount of Encumbrances on Surrendered Property	\$41,324.23
F. Total Gross Encumbrances (D+E)	\$41,324.23
G. Total Equity (not including surrendered property) / (A-D)	\$775.00
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$775.00
J. Total Exemptions Claimed	\$775.00
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 64 of 69

AT&T PO Box 8212 Aurora, IL 60572

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519 Schaumburg, IL 60173

Verizon Wireless 1515 Woodfield Rd.

Bank of America PO Box 1598 Norfolk, VA 23501

Guaranty Bank PO Box 240200 Milwaukee, WI 53223

Car finance Merchants Credit Associations PO Box 660057 4110 Clemson Blvd Ste A Dallas, TX 75266-0057 Anderson , SC 29621

Comcast PO Box 3002 Southeastern, PA 19398

Peoples Gas n/k/a People's Energy 200 E. Randoph Chicago, IL 60687-6207

ComEd Customer Care Center P.O.Box 87522 Chicago, IL 60680

PNC Bank 2730 Liberty Ave. Pittsburgh, PA 15222

Commonwealth Edison Santander Consumer USA
Bill Payment Center PO Box 961245
Chicago, IL 60668-0001 FT Worth, TX 76161

Department of Education/Nelnet Sprint 3015 Parker Rd Suite 400 P.O.Box 600760 Aurora, CO 80014 Jacksonville, F Aurora, CO 80014

Jacksonville, FL 32260-0670

Discover Greenwood Trust Comp P.O.Box 6000 Dover, DE 19903-6000

St. Mary of Nazareth Hospital 2233 W. Division St. Chicago, IL

Equifax State Collection Service 11601 Roosevelt Blvd PO Box 6250 Saint Petersburg, FL 33716 Madison, WI 53701

ERC

TCF Bank 8014 Bayberry Rd 800 Burr Ridge Parkway Jacksonville, FL 33256 Burr Ridge, IL 60521 Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 65 of 69

Robert J. Adams & Associates, Bar No. 0013056 Robert J. Adams & Associates 901 W. Jackson, Suite 202 Chicago, IL 60607 (312) 346-0100 Attorney for the Petitioner

UNITED STATES BANKRUPTCY COURT FOR THE

NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

Chapter: 7

In re:	Case No.:	
Kayel Michelle Ellis	SSN: xxx-xx-6825	
	SSN:	
Debtor(s)	Numbered Listing of Creditors	
A 1.1	99	

3615 Tamarind Hazel Crest, IL 60429

Address:

	Creditor name and mailing address	Category of claim	Amount of claim
1.	AT&T PO Box 8212 Aurora, IL 60572	Unsecured Claim	\$1,000.00
2.	Bank of America PO Box 1598 Norfolk, VA 23501	Unsecured Claim	\$200.00
3.	Car finance PO Box 660057 Dallas, TX 75266-0057	Secured Claim	\$28,270.00
4.	Comcast PO Box 3002 Southeastern, PA 19398	Unsecured Claim	\$500.00
5.	ComEd Customer Care Center P.O.Box 87522 Chicago, IL 60680	Unsecured Claim	\$500.00
6.	Commonwealth Edison Bill Payment Center Chicago, IL 60668-0001	Unsecured Claim	\$0.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 66 of 69

in re: Kayel Michelle Ellis

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
7.	Department of Education/Nelnet 3015 Parker Rd Suite 400 Aurora, CO 80014	Unsecured Claim	\$10,000.00
8.	Discover Greenwood Trust Comp P.O.Box 6000 Dover, DE 19903-6000	Unsecured Claim	\$3,500.00
9.	Equifax 11601 Roosevelt Blvd Saint Petersburg, FL 33716	Unsecured Claim	\$300.00
10.	ERC 8014 Bayberry Rd Jacksonville, FL 33256	Unsecured Claim	\$0.00
11.	First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519	Unsecured Claim	\$300.00
12.	Guaranty Bank PO Box 240200 Milwaukee, WI 53223	Unsecured Claim	\$300.00
13.	Merchants Credit Associations 4110 Clemson Blvd Ste A Anderson , SC 29621	Unsecured Claim	\$91.00
14.	Peoples Gas n/k/a People's Energy 200 E. Randoph Chicago, IL 60687-6207	Unsecured Claim	\$500.00
15.	PNC Bank 2730 Liberty Ave. Pittsburgh, PA 15222	Unsecured Claim	\$300.00

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 67 of 69

in re: Kayel Michelle Ellis Debtor Case No. (if known) Creditor name and mailing address Category of claim Amount of claim 16. Santander Consumer USA Secured Claim \$13,054.23 PO Box 961245 FT Worth, TX 76161 17. Sprint Unsecured Claim \$261.00 P.O.Box 600760 Jacksonville, FL 32260-0670 18. St. Mary of Nazareth Hospital **Unsecured Claim** \$300.00 2233 W. Division St. Chicago, IL 19. State Collection Service **Unsecured Claim** \$285.00 PO Box 6250 Madison, WI 53701 20. TCF Bank **Unsecured Claim** \$300.00 800 Burr Ridge Parkway Burr Ridge, IL 60521 21. Verizon Wireless **Unsecured Claim** \$300.00 1515 Woodfield Rd. Schaumburg, IL 60173 (The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.) **DECLARATION**

Debtor:	/s/ Kayel Michelle Ellis	Date: 7/25/2016
	Kayel Michelle Ellis	

named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*, consisting of 3 sheets (including this declaration), and that it is true and correct to the best of my information and belief.

I, Kayel Michelle Ellis

Case 16-23961 Doc 1 Filed 07/26/16 Entered 07/26/16 16:31:10 Desc Main Document Page 68 of 69

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Kayel Michelle Ellis CASE NO.

CHAPTER 7

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that on July 25, 2016, a copy of the attached Chapter 13 Plan, with any attachments, was served on each party in interest listed below, by placing each copy in an envelope properly addressed, postage fully prepaid in compliance with Local Rules.

Date: 7/25/2016 /s/ Robert J. Adams & Associates

Robert J. Adams & Associates

Attorney for the Debtor(s)

AT&T PO Box 8212 Aurora, IL 60572 Commonwealth Edison Bill Payment Center Chicago, IL 60668-0001 First Premier Bank P.O.Box 5519

Sioux Falls, SD 57117-5519

Bank of America PO Box 1598 Norfolk, VA 23501 Department of Education/Nelnet 3015 Parker Rd Suite 400 Aurora, CO 80014 Guaranty Bank PO Box 240200 Milwaukee, WI 53223

Car finance PO Box 660057 Dallas, TX 75266-0057 Discover Greenwood Trust Comp P.O.Box 6000 Dover, DE 19903-6000 Kayel Michelle Ellis 3615 Tamarind Hazel Crest, IL 60429

Comcast PO Box 3002 Southeastern, PA 19398 Equifax 11601 Roosevelt Blvd Saint Petersburg, FL 33716 Merchants Credit Associations 4110 Clemson Blvd Ste A Anderson , SC 29621

ComEd Customer Care Center P.O.Box 87522 Chicago, IL 60680 ERC 8014 Bayberry Rd Jacksonville, FL 33256 Peoples Gas n/k/a People's Energy 200 E. Randoph Chicago, IL 60687-6207

IN RE: Kayel Michelle Ellis CASE NO.

CHAPTER 7

CERTIFICATE OF SERVICE

(Continuation Sheet #1)

PNC Bank 2730 Liberty Ave. Pittsburgh, PA 15222

Santander Consumer USA PO Box 961245 FT Worth, TX 76161

Sprint P.O.Box 600760 Jacksonville, FL 32260-0670

St. Mary of Nazareth Hospital 2233 W. Division St. Chicago, IL

State Collection Service PO Box 6250 Madison, WI 53701

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

Verizon Wireless 1515 Woodfield Rd. Schaumburg, IL 60173